

FULTON COUNTY PURCHASING DEPARTMENT

REQUEST FOR QUOTE NUMB	08GS61367A						
WILL BE RECEIVED UNTIL 2	April 17, 2008						
DESCRIPTION: CONTOURED GUES	ST LEATHER CHAIRS						
MENTAL HEALTH, DEVELOPMENT		DISEASES					
(This quote is accessible through Ful-	ton County website)						
Return to: Responses may be submitted for quotes on the Vendor Self Service system at www.fultonvendorselfservice.co.fulton.ga.us							
FAX QUOTES ARE Fulton County Purchasing Department							
ACCEPTABLE	Public Safety Building, Suite 1168						
(404) 893-1726 OR	130 Peachtree Street, S.W. Atlanta, Georgia 30303						
(404) 093-1720 OK	(404) 730-5800						
ANY QUESTIONS REGARDING PURCHASING PROCEDURES OR THE SPECIFICATIONS SHOULD BE ADDRESSED <u>ONLY</u> TO THE PURCHASING CONTACT PERSON LISTED BELOW. BIDDERS MAY NOT HAVE CONTACT WITH COUNTY OFFICERS, ELECTED OFFICIALS OR COUNTY EMPLOYEES REGARDING THIS BID PRIOR TO AWARD OF PURCHASE ORDER. VIOLATION OF THIS INSTRUCTION WILL RESULT IN YOUR BID BEING FOUND NON-RESPONSIVE.							
CONTACT NAME:	E-Mail Address :	Telephone Number:					
Gertis Strozier	gertis.stroizer@fultoncountyga.gov.	double 404-730-5826 double 404-7580 do					
must also be completed. Unless specifications indicate "NO SUBSTITUTE", items determined by Fulton County to be "EQUAL OR BETTER" will be given full consideration. All prices QUOTED must be "FOB DELIVERED" unless otherwise requested, and must be submitted in the format requested. The County reserves the right to cancel the solicitation and to reject any or all quotes in whole or in part and is not bound to accept any quote if rejection of that quote is determined to be contrary to the best interest of the County.							
Company Name:							
Company Address:							
City	State Zip	Code					
Telephone Number: Fa	x Number: E-Mail A	ldress:					
RESPONSES MUST BE DELIVERED TO THE PURCHASING OFFICE BY THE DATE INDICATED.							
Person submitting QUOTE: (Please Print)	Date	;					
Title							
*Signature of the person submitting QUOTE	:						
*This person has binding authority to sign contracts on behalf of the responding company. By signing this form and all attachments, vendor agrees that their quote is an offer to sell. All bidders shall comply with all Fulton County purchasing laws, policies, and procedures, as well as relevant state and federal laws—including compliance with EEOC hiring guidelines and requirements under the Americans with Disabilities Act.							
NO RID: REASON:							

REQUEST FOR QUOTE SPECIFICATIONS

Quote Number: 08GS61367A Opening Date: April 17, 2008

Contoured Guest Leather Chairs

Fulton County Department of Mental Health, Developmental Disabilities and Addictive Diseases (MHDDAD)

1. **DESCRIPTION**

Fulton County Department of Purchasing & Contract Compliance is soliciting quotes from qualified vendors to provide twenty-six (26) contoured guest leather chairs to the MH/DD/AD Child and Adolescent and Family Center.

2. CONTACT PERSON

Please contact Gertis Strozier, Procurement Officer at (404) 730-5826 or by e-mail gertis.stroizer@fultoncounty.ga.gov with any procedural or technical questions. All questions should be submitted in writing to the Department of Purchasing & Contract Compliance contact person. Any responses made by the County will be provided in writing to all Quoters by addendum. No verbal responses shall be authoritative.

You must be registered in the County's AMS System in order for the Department of Purchasing & Contract Compliance to issue your company a Purchase Order or to receive payments. If you are not a registered vendor, you may access and complete the vendor application via the County's Vendor Registration website (www.fultonvendorselfservice.co.fulton.ga.us). You must provide a copy of your current Business License in order to complete the vendor registration process.

If your company is a registered vendor, you can respond to all quotes on line and in real time on this website.

3. PRODUCT/SERVICE SPECIFICATIONS

Contoured guest leather chairs, with built-in lumbar support top grain leather upholstery.

Mfr. name:	K-LOG or equa	l	
Mfr. number: I	LGC-1		
Color:	Гап	Quantity:	Twelve (12)
Color: H	Black	Quantity:	Fourteen (14)
Leather padded a Seat: 20 ½ "Wx1		rame with black	powder-coat paint finish
Back: 20 ½ "W x			
Overall: 251/4 "W	x 27½ "D x 34	1 ³ / ₄ "H, 32 lbs.	
Unit price each		\$:	
Delivery charge:		\$	
Delivery Days fro	om receipt of pr	urchase order:	

If vendor is quoting other than Superior Brand Product specify in space below:

Mfr. Name:				
Mfr. Number:				
Sizes:				
Finish:				
Unit Price:	\$			
Delivery charge:	\$			
Delivery Days from received	ipt of purcha	se order:		

*Note- BRAND NAME SPECIFICATIONS AND APPROVED EQUIVALENTS. Unless otherwise specified, manufacturer's names, trade names, brand names, information and/or catalog numbers listed in the specifications are intended only to identify the quality and characteristics desired. They are not intended to limit competition. The Vendor may offer any equivalent product which meets or exceeds the specifications. If quotations are based on equivalent products, the quote must: a) Indicate the alternate manufacturer's name and catalog number; b) Include complete descriptive literature and/or specifications; c) Include proof that the proposed equivalent will meet the specifications. The County reserves the right to be the sole judge of what is equal and acceptable to meet its needs in all respects. If Bidder fails to name a substitute, goods identical to the published standard must be furnished.

4. SPECIAL CONDITIONS/INSTRUCTIONS

Deliver furniture to the following address:

Fulton County Supply and Transportation Division 79 Milton Avenue, SW Atlanta, GA 30310 From 8:30 A.M. to 3:30 P.M. EST

5. INSURANCE & RISK MANAGEMENT PROVISIONS

N/A